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Image# 201608109022187319

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X For	or Other Tha	an An Authorize	d Committee	•		
1. NAME OF 1	TYPE OR PRINT	Γ▼ Ev	ample: If typing	type		Office Use Only
COMMITTEE (in full)			er the lines.	, type	12FE4M5	
HAWAII REPUBLICAN	PARTY					
ADDRESS (number and street)	725 KAPIOLAI	NI BLVD				
Check if different than previously reported. (ACC)	STE 105 HONOLULU				HI	96813
2. FEC IDENTIFICATION NUI	MBER ▼	CITY ▲		5	STATE A	ZIP CODE ▲
C C00085506		3. IS THIS REPORT	× NE		AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		ay 20 (M5) n 20 (M6)		20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:		Apr 20 (M4)	Jul	I 20 (M7)	Oct 2	Year Only) Year Only) Jan 31 (YE)
April 15 Quarterly Report (Q1	(c) 12-E	Day	Primary (12P)	Г	General ((12G) Runoff (12R)
July 15 Quarterly Report (Q2	2)	E-Election ort for the:	Convention (12	2C)	Special (12S)
October 15 Quarterly Report (Q3	3)		M M /	D D /	Y	in the
January 31 Year-End Report (YE	≣)	Election on				State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POS	Oay ST-Election ort for the:	General (30G)		Runoff (3	0R) Special (30S)
Termination Report (TER)		Election on	M = M /	D = D /	Y • Y • Y • Y	in the State of
i. Covering Period 07 01 2016 through 07 31 2016						
I certify that I have examined this	s Report and to	the best of my kno	wledge and be	lief it is tru	e, correct and	complete.
Type or Print Name of Treasurer	MARY G SMA	RT				
Signature of Treasurer MARY	G SMART		[Electronically F	Filed] D	ate 08	/ 10 / Y Y Y Y Y Y Y 2016
NOTE: Submission of false, erroned	ous, or incomple	ete information may s	ubject the perso	n signing th	is Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SHMMARY PAGE

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		1 1.50
HAWAII REPUBLICAN PARTY		
Report Covering the Period: From:	07 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	o: 07 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		50981.53
(b) Cash on Hand at Beginning of Reporting Period	. 50405.21	
(c) Total Receipts (from Line 19)	12939.92	162396.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	63345.13	213378.05
7. Total Disbursements (from Line 31)	14870.55	164903.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	48474.58	48474.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	. 0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	. 0.00	
This committee has qualified as a mu	ulticandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HAWAII REPUBLICAN PARTY

		COLUMN B
I. Receipts	I. Receipts COLUMN A Total This Period	
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	5785.00	80525.90
(ii) Unitemized	1779.05	29214.43
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	7564.05	109740.33
(h) Political Party Committees	0.00	0.00
	7	
(such as PACs)	0.00	20000.00
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	7564.05	129740.33
Party Committees	0.00	5250.00
All Loans Received	0.00	0.00
oan Ronayments Received	0.00	0.00
	7	
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
		7
Political Committees	0.00	0.00
Other Federal Receipts		
	0.81	46.81
` '		
(from Schedule H3)	5375.06	27359.38
	0.00	0.00
b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	5375.06	27359.38
	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	erating Expenditures:		Jaionaa 16a1-10-Date
(a)	Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	2953.88	23126.52
	(ii) Non-Federal Share	5251.35	41113.79
(b)	Other Federal Operating		
(-)	Expenditures	875.49	59683.58
(c)	Total Operating Expenditures	9080.72	123923.89
0 Tro	(add 21(a)(i), (a)(ii), and (b))▶	3000.72	120020.00
	nsfers to Affiliated/Other Party mmittees	0.00	0.00
Fed	ntributions to deral Candidates/Committees	0.00	0.00
	Other Political Committees	0.00	
	ependent Expenditures e Schedule E)	0.00	0.00
.5. Cod	ordinated Party Expenditures		
(2 l (us	U.S.C. §441a(d)) e Schedule F)	0.00	0.00
6. Loa	an Repayments Made	0.00	0.00
		0.00	0.00
Ref	ans Madefunds of Contributions To:	0.00	0.00
(a)	Individuals/Persons Other Than Political Committees	1000.00	1000.00
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees		
	(such as PACs)	0.00	0.00
(d)	Total Contribution Refunds		
,	(add Lines 28(a), (b), and (c))▶	1000.00	1000.00
9. Oth	ner Disbursements	0.00	0.00
		7 7	4 1 4
	deral Election Activity (2 U.S.C. §431(20))		
(a)	Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(**) III II OI	0.00	0.00
(b)	(ii) "Levin" Share Federal Election Activity Paid Entirely	0.00	0.00
()	With Federal Funds	4789.83	39979.58
(c)	Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	4789.83	39979.58
			, , , , , , , , , , , , , , , , , , , ,
	al Disbursements (add Lines 21(c), 22,		
23,	24, 25, 26, 27, 28(d), 29 and 30(c))	14870.55	164903.47
	al Federal Disbursements		
	btract Line 21(a)(ii) and Line 30(a)(ii)		
fror	m Line 31)▶	9619.20	123789.68

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	7564.05	129740.33
4. Total Contribution Refunds (from Line 28(d))	1000.00	1000.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6564.05	128740.33
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	3829.37	82810.10
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	3829.37	82810.10

FOR LINE NUMBER: **PAGE** 6 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HAWAII REPUBLICAN PARTY Full Name (Last, First, Middle Initial) MR. BRADFORD BURTON Date of Receipt Mailing Address 2243 OKOA STREET 2016 07 06 City Zip Code State Transaction ID: SA11AI.5774 **HONOLULU** HI 96821 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation **HPMG PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) B. MS. CINDY SUE CLARK Date of Receipt Mailing Address 4340 E WAIOLA LOOP 07 31 2016 City State Zip Code Transaction ID: SA11AI.5779 HI **KIHEI** 96753 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation DA CLARK MANAGEMENT **OWNER** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1350.00 Full Name (Last, First, Middle Initial) c. LEI FAGAN Date of Receipt Mailing Address 33 KEALAMAULOA PLACE M = M 07 28 2016 City Zip Code State Transaction ID: SA11AI.5747 HI HAIKU 96708 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation HI DEPT. OF EDUCATION **TEACHER** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 1100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 7 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (In Full)

HAWAII REPUBLICAN PARTY

HAWAII REPUBLICAN PART	Y	
Full Name (Last, First, Middle Initial) IONE GUMPFER		Date of Receipt
Mailing Address 1554 KUPAU STREET		07 20 2016
City	State Zip Code	Transaction ID : SA11AI.5701
KAILUA	HI 96734	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00 Memo Item
Name of Employer	Occupation	Mellio itelli
RETIRED	RETIRED	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
Full Name (Last, First, Middle Initial) MR. ROBERT W. HASTINGS II		Date of Receipt
Mailing Address P.O. BOX 628		07 26 2016
City	State Zip Code	Transaction ID : SA11AI.5744
KAMUELA	HI 96743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HASTINGS & LAUN, LLC	Occupation ATTORNEY	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS. JANICE M HELLREICH Mailing Address 225 KUUHOA PL		Date of Receipt
-		07 20 2016
City KAILUA	State Zip Code HI 96734	Transaction ID : SA11AI.5702 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Memo Item
SELF-EMPLOYED	SPEECH THERAPIST	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1200.00	
SUBTOTAL of Receipts This Page (optional)	>	365.00
TOTAL This Period (last page this line numbe	er only)	

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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ITEMIZED RECEIPTS for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HAWAII REPUBLICAN PARTY Full Name (Last, First, Middle Initial) MR. ROBERT HICKLING Date of Receipt Mailing Address 3814 ILUNA PLACE 2016 07 13 City Zip Code State Transaction ID: SA11AI.5783 **PRINCEVILLE** HI 96722 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. MR. CLIFTON A. JENKINS Date of Receipt Mailing Address 87-1022 KONINI ST. 07 25 2016 City State Zip Code Transaction ID: SA11AI.5719 WAIANAE HI 96892 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation **RETIRED RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. MS. RITA KAMA-KIMURA Date of Receipt Mailing Address 95-1519 AINAMAKUA DR. #50 07 29 2016 City State Zip Code Transaction ID: SA11AI.5749 HI MILILANI 96789 Amount of Each Receipt this Period FEC ID number of contributing С 100.00 federal political committee. Memo Item Name of Employer Occupation UNEMPLOYED **UNEMPLOYED** Receipt For: Aggregate Year-to-Date ▼ Primary General 213.60 Other (specify) 275.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HAWAII REPUBLICAN PARTY Full Name (Last, First, Middle Initial) MR. DENNIS C.H. KIM Date of Receipt Mailing Address 94-309 MAIAOHE PL. 30 2016 07 City Zip Code State Transaction ID: SA11AI.5782 MILILANI HI 96789 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** LARIE MANUTAI Date of Receipt Mailing Address 546 LAUIKI ST #4 07 10 2016 City State Zip Code Transaction ID: SA11AI.5787 **HONOLULU** HI 96826 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation STATE OF HAWAII ATTORNEY Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 390,00 Full Name (Last, First, Middle Initial) c. JOHNNY M MCELREE Date of Receipt Mailing Address 69-1000 KOLEA KAI CIRCLE M = M 20 07 2016 **UNIT 7E** City State Zip Code Transaction ID: SA11AI.5703 HI WAIKOLOA 96738 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Memo Item Name of Employer Occupation **REALTOR CENTURY 21 ALL ISLANDS** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 560.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 10 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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FOR LINE NUMBER: PAGE 11 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 12 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HAWAII REPUBLICAN PARTY Full Name (Last, First, Middle Initial) MR. MARK TORREANO SR. Date of Receipt Mailing Address 343 HOBRON LANE L101 2016 07 24 City State Zip Code Transaction ID: SA11AI.5757 HONOLULU HI 96815 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 1260.00 Other (specify) Full Name (Last, First, Middle Initial) B. KAY L WILLIAMSON Date of Receipt Mailing Address 492 KEKUPUA STREET 07 01 2016 City State Zip Code Transaction ID: SA11AI.5743 HONOLULU HI 96825 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer Occupation **RETIRED RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2400.00 Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

330.00

5785.00

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	X 21b	22 23 24 25 26 28a 28b 28c 29 30b	
Anna tatawa atau ana 17				
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	V (r			
HAWAII REPUBLICAN PARTY				
Full Name (Last, First, Middle Initial)			B (B)	
A. AXIA BANKCARD MERCHANT			Date of Disbursement	
Mailing Address 1311 KAPIOLANI BLVD SUITE 512			07 01 2016	
,	State Zip Code		Transaction ID : SB21B.5670	
HONOLULU Purpose of Disbursement	HI 96814		1141134041011 15 : 05215.0010	
MERCHANT FEES			Amount of Each Disbursement this Period	
Candidate Name		Category/	2070	
		Type	36.79	
Office Sought: House Disburser			Memo Item	
Senate President	Primary General Other (specify) ▼			
State: District:	Callot (opcoliy) ▼			
Full Name (Last, First, Middle Initial)				
3. AXIA BANKCARD MERCHANT			Date of Disbursement	
Mailing Address 1311 KAPIOLANI BLVD SUITE 512			07 01 2016	
City HONOLULU	State Zip Code HI 96814		Transaction ID : SB21B.5672	
Purpose of Disbursement MERCHANT FEES				
Candidate Name			Amount of Each Disbursement this Period	
Canadate Name		Category/ Type	69.55	
Office Sought: House Disburser	ment For:	71	Memo Item	
Senate	Primary General		_	
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C- AXIA BANKCARD MERCHANT			Date of Disbursement	
			M = M / D = D / Y = Y = Y	
Mailing Address 1311 KAPIOLANI BLVD			07 11 2016	
SUITE 512 City	State Zip Code			
HONOLULU	HI 96814		Transaction ID : SB21B.5673	
Purpose of Disbursement MERCHANT FEES			Amount of Fook Dishurosment this Device	
Candidate Name		Category/	Amount of Each Disbursement this Period	
		Type	13.90	
Office Sought: House Disburser			Memo Item	
Senate President	Primary General Other (specify) ▼			
State: District:	oniei (specily)			
SUBTOTAL of Disbursements This Page (optional)		·····•	120.24	
TOTAL This Period (last page this line number only)		.		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE I	
	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 26 29 30 30 30 30 30 30 30 30 30 30 30 30 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) HAWAII REPUBLICAN PARTY			
Full Name (Last, First, Middle Initial) A. BANK OF HAWAII			Date of Disbursement
Mailing Address PO BOX 2900			07
HONOLULU	State Zip Code HI 96846		Transaction ID : SB21B.5674
Purpose of Disbursement BANK FEES			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	25.00
	nent For: Primary General Other (specify) ▼		Memo Item
State: District: Full Name (Last, First, Middle Initial)	·		
B. BANK OF HAWAII			Date of Disbursement
Mailing Address PO BOX 2900			07 27 2016
HONOLULU	State Zip Code HI 96846		Transaction ID : SB21B.5675
Purpose of Disbursement BANK FEES			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	33.53
President	nent For: Primary General Other (specify)		Memo Item
State: District: Full Name (Last, First, Middle Initial) - HAWAII MEDICAL SERVICE ASSO	OCIATION		Date of Disbursement
Mailing Address PO BOX 29810			07 29 2016
HONOLULU	State Zip Code HI 96820		Transaction ID : SB21B.5681
Purpose of Disbursement EMPLOYEE BENEFITS Candidate Name			Amount of Each Disbursement this Period
Office Sought: House Disbursem	agent Form	Category/ Type	347.91
Senate	Primary General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			406.44
TOTAL This Period (last page this line number only).			

SCHEDULE B (FEC Form 3X)	Lisa sanarata sahadula(s)	separate schedule(s) FOR LINE NUMBER:		PAGE 15 OF 23
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) HAWAII REPUBLICAN PARTY	and address of any pollucal	. Johnmidee 10	Sonor Continual	such committee.
Full Name (Last, First, Middle Initial) A. INTEGRATED BUSINESS SOLUT	IONS OF HAWAII		Date of Disbu	rsement
Mailing Address 99-1046 IWAENA STREET				29 2016
City S	State Zip Code HI 96701		Transaction	ID : SB21B.5683
Purpose of Disbursement PRINTING SERVICES			Amount of Ea	ch Disbursement this Period
Candidate Name	,	Category/ Type		292.81
	nent For: Primary General Other (specify)		Memo Item	1
State: District:				
Full Name (Last, First, Middle Initial) 3.			Date of Disbu	rsement
Mailing Address			W = M / C	, , , , , , , , , , , , , , , , , , ,
City	State Zip Code			
Purpose of Disbursement			Amount of Ea	ch Disbursement this Period
Candidate Name	,	Category/ Type		
President	nent For: Primary General Other (specify)		Memo Item	1
State: District: Full Name (Last, First, Middle Initial)				
2.			Date of Disbu	rsement
Mailing Address				
City	State Zip Code			
Purpose of Disbursement	I			
Candidate Name	l	Category/ Type		ch Disbursement this Period
	nent For: Primary General Other (specify)		Memo Item	
SUBTOTAL of Disbursements This Page (optional)				292.81
GODIOTAL OF DISDUISEMENTS THIS Page (optional)			7	819.49

SCHEDULE B (FEC Form 3X)	l lloo concrete cohodulo(o) l		NUMBER: PAGE 16 OF 23	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 X 28a 28b 28c 29 30	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) HAWAII REPUBLICAN PARTY	and an analysis of the second		22 22 22 22 22 22 22 22 22 22 22 22 22	
Full Name (Last, First, Middle Initial)	DATION		Data of Diahuraamant	
A. LANDMARK LOGISTICS CORPO	RATION		Date of Disbursement	
Mailing Address 520 LUNALILO HOME RD 8425			07 05 2016	
City	State Zip Code		Transaction ID : SB28A.5791	
HONOLULU Purpose of Disbursement	HI 96825		Transaction is . Obzox.3731	
CONTRIBUTION REFUND			Amount of Each Disbursement this Period	
Candidate Name		Category/	1000.00	
Office Sought: House Disburser	ment For:	Туре	Memo Item	
Senate	Primary General		Mello Rell	
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
3.			Date of Disbursement	
Mailing Address			M = M / D = D / Y = Y = Y	
maining / tourooc				
City	State Zip Code			
Purpose of Disbursement				
Candidate Name			Amount of Each Disbursement this Period	
Candidate Name		Category/ Type		
Office Sought: House Disburser	ment For:	71	Memo Item	
Senate President	Primary General		_	
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
Mailing Address			M M / D D / Y Y Y Y	
City	State Zip Code			
	p			
Purpose of Disbursement			Amount of Each Disbursement this Period	
			AUTOUR OF EACH DISHURSEMENT THIS PAYION	
Candidate Name		Category/	Amount of Each Disbursoment this Feriod	
	ment For:	Category/ Type		
	Primary General			
Office Sought: House Senate President Disburser				
Office Sought: House Disburser Senate	Primary General			
Office Sought: House Senate President Disburser	Primary General Other (specify) ▼	Туре		

SCHEDULE B (FEC Form 3X)	Lico conorato cabadula (-)	FOR LINE NUMBER: PAGE	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	v one) □ 22 □ 23 □ 24 □ 25 □ 26
	Detailed Summary Page	27	22 23 24 25 26 28a 28b 28c 29 X 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		sed by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	aa address of any poiltie	U	25.5 Commoduono nom Suon committee.
HAWAII REPUBLICAN PARTY			
Full Name (Last, First, Middle Initial)			Data of Dishumana
A. DEPARTMENT OF TAXATION			Date of Disbursement
Mailing Address PO BOX 3827			07 05 2016
,	State Zip Code		Transaction ID : SB30B.5679
HONOLULU Purpose of Disbursement	HI 96812		
Purpose of Disbursement PAYROLL TAXES		· · · · ·	Amount of Each Disbursement this Period
Candidate Name		Category/	132.79
Office Squaht	aont For	Type	
Office Sought: House Disbursen Senate	nent For: Primary General		Memo Item
	Other (specify)		l.
State: District:			
Full Name (Last, First, Middle Initial)			
3. DEPARTMENT OF TAXATION			Date of Disbursement
Mailing Address PO BOX 3827			07 14 2016
			2010
,	State Zip Code HI 96812		Transaction ID : SB30B.5680
HONOLULU Purpose of Disbursement	HI 96812		
PAYROLL TAXES			Amount of Each Disbursement this Period
Candidate Name		Category/	132.79
Office Sought: House Disbursen	nent For:	Туре	
	Primary General		Memo Item
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			Date of Dichursoment
INTERNAL REVENUE SERVICE			Date of Disbursement
Mailing Address PO BOX 7704			07 06 2016
,	State Zip Code		Transaction ID : SB30B.5684
	CA 94120		
Purpose of Disbursement PAYROLL TAXES		· · · ·	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	589.66
Office Sought: House Disbursen			Memo Item
	Primary General Other (specify) ▼		
State: District:	. r=3/ . ▼		l
-			
SUBTOTAL of Disbursements This Page (optional)		······	855.24
TOTAL This Period (last nage this line number only)			

SCHEDULE B (FEC Form 3X)	Llea caparate ashedula/s\	FOR LINE NUMBER:	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 X 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	addition of any pointed	55	The second secon
HAWAII REPUBLICAN PARTY			
Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE			Date of Disbursement
- INTLINAL REVENUE SERVICE			M M / D D / Y Y Y Y
Mailing Address PO BOX 7704			07 20 2016
•	State Zip Code CA 94120		Transaction ID : SB30B.5685
Purpose of Disbursement	94120		
PAYROLL TAXES			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	589.68
Office Sought: House Disbursem	nent For:	туре	Memo Item
	Primary General		
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
3. MARCIA TAGAVILLA			Date of Disbursement
Mailing Address 5119 LIKINI STREET			07 06 2016
Maining Address 5118 FIXINI STREET			0. 00 2010
City S HONOLULU	State Zip Code HI 96818		Transaction ID : SB30B.5687
Purpose of Disbursement	90010		
PAYROLL Candidate Name			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1672.46
Office Sought: House Disbursem	nent For:	.,,,,,	Memo Item
	Primary General		_
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
MARCIA TAGAVILLA			Date of Disbursement
Mailing Address 5119 LIKINI STREET			07 19 2016
Maining Address 5119 EIRINI STREET			0, 10 2010
City S HONOLULU	State Zip Code HI 96818		Transaction ID : SB30B.5688
Purpose of Disbursement	30010		
PAYROLL Conditate Name			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1672.45
Office Sought: House Disbursem	nent For:	1,400	Memo Item
	Primary General		
State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		·····•	3934.59
TOTAL This Period (last nage this line number only)			4789.83

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	19	OF	23
FOR LI	NF 1	8a OF	FORM 3X

	DF COMMITTEE (In Full) REPUBLICAN PARTY		
NAM	E OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
HAV	VAII REPUBLICAN PARTY	07 28 / 2016	5375.06
BRE	AKDOWN OF TRANSFER RECEIVED		
i)	Total Administrative		5375.06 Transaction ID : H3.5789
ii)	Generic Voter Drive		Transaction ID: H3.5789
iii)	Exempt Activities		
iv)	Direct Fundraising (List Activity or Event Iden	tifier)	
	a)		
	b)		
	c) Total Amount Transferred For Direct Fundra		
(v)	Direct Candidate Support (List Activity or Eve		1
	a)		
	b)		
	c) Total Amount Transferred For Direct Candid	ate Support	
vi)	Public Communications Referring Only to F	arty (Made by PAC)	
	TOTALS FO	R BREAKDOWN OF TRANSFER RECEIVE	ED
TOTAL	This Period (Administrative)		5375.06
TOTAL	This Period (Generic Voter Drive)		0.00
TOTAL	This Period (Exempt Activities)		0.00
TOTAL	This Period (Direct Fundraising)		0.00
TOTAL	This Period (Direct Candidate Support)		0.00
TOTAL	This Period (Public Communications Referring	Only to Party)	0.00
TOTAL	This Period (Total Amount Transferred)		5375.06

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	20	OF	23	
FOR LI	NE 2	1a OF	FORM	зх

NAME OF COMMITTEE (In Full)

۱.	Full Name (Last, First, Middle Initial) Transaction	tion ID : H4	.5677	☐ Memo Item	Allocat	ed Activity or Event:
	CENTRAL PACIFIC BANK				X	dministrative Fundraising Exem
	Mailing Address PO BOX 135010				Vo	oter Drive Direct Candidate Suppo
	City HONOLULU	State	Zip Code		Pı	ublic Comm (ref to party only) by PAC
		HI	96801		Alloc	cated Activity or Event Year-To-Date
	Purpose of Disbursement: MORTGAGE					57576.08
	Activity or Event Identifier:			Category/		M = M / D = D / Y = Y = Y
	Administrative			Type	Date	07 01 2016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
	531.36		7 7	944.64		1476.00
3.	Full Name (Last, First, Middle Initial) Transac	ction ID : H4	.5686	Memo Item		ed Activity or Event:
	LCA BANK CORPORATION				X A	dministrative Fundraising Exem
	Mailing Address PO BOX 1650				U Vo	oter Drive Direct Candidate Suppo
	City	State	Zip Code		D Pi	ublic Comm (ref to party only) by PAC
	TROY Purpose of Disbursement:	MI	48099		Alloc	cated Activity or Event Year-To-Date
	EQUIPMENT RENTAL					58310.19
	Activity or Event Identifier: Administrative			Category/		M = M / D = D / Y = Y = Y
				Type	Date	07 07 2016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
	264.28		, ,	469.83		734.11
) .	Full Name (Last, First, Middle Initial) Transa	ction ID : H4	.5689	Memo Item		ed Activity or Event:
	MARCIA TAGAVILLA				X Ac	dministrative Fundraising Exem
	Mailing Address 5119 LIKINI STREET				U Vo	oter Drive Direct Candidate Suppo
	City	State	Zip Code		Pı	ublic Comm (ref to party only) by PAC
	HONOLULU	HI	96818		Alloc	cated Activity or Event Year-To-Date
	Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRY					58460.19
	Activity or Event Identifier: Administrative			Category/		M M / D D / Y Y Y Y Y
				Туре	Date	07 07 2016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
				96.00		150.00
	54.00	L	7 7			
SI	7	al Activity Th	is Page		_	
sı	JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	al Activity Th	nis Page NONFEDERAL	SHARE	=	TOTAL AMOUNT
SI	JBTOTAL of Allocated Federal and NonFederal	•	•	SHARE 1510.47	 1 г	TOTAL AMOUNT 2360.11
	JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	,]	NONFEDERAL	1510.47 d NonFederal sha		2360.11

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	21	С	F	23	
FOR	LINE	21a	OF	FORM	3X

	DERAL/NONFEDERAL ACTIV	/11 Y			FOR LINE 21a O	F FORM 3
	AME OF COMMITTEE (In Full)					
<u>H</u>	AWAII REPUBLICAN PARTY					
A.	Full Name (Last, First, Middle Initial) Transa	ction ID : H4.5	690	🔀 Memo Item	Allocated Activity or Event:	
	MAILCHIMP				Administrative Fundraising	Exempt
	Mailing Address 675 PONCE DE LEON AVE STE 5000	NE			Voter Drive Direct Candida	ate Support
	City	State	Zip Code		Public Comm (ref to party only) b	by PAC
	ATLANTA	GA	30308		Allocated Activity or Event Year-To-I	
	Purpose of Disbursement: TAGAVILLA REIMBURSEMENT: ONLINE SI	JBSCRIPTION	IS		58460.	
	Activity or Event Identifier:					
	Administrative			Category/ Type	Date 07 07 2	2016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	54.00		, , ,	96.00	150	0.00
В.	Full Name (Last, First, Middle Initial) Transa	ction ID : H4.5	5682	Memo Item	Allocated Activity or Event:	
	HAWAIIAN TELECOM				Administrative Fundraising	Exempt
	Mailing Address PO BOX 30770				Voter Drive Direct Candida	
	City	State	Zip Code		Public Comm (ref to party only) to	
	HONOLULU	HI	96820		Allocated Activity or Event Year-To-I	-
	Purpose of Disbursement: BROADBAND SERVICES				58713	
	Activity or Event Identifier:					
	Administrative			Category/ Type	Date 07 11 2	016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	91.17		, , , ,	162.09	253	3.26
C.	Full Name (Last, First, Middle Initial) Transa MARCIA TAGAVILLA	ction ID : H4.5	5691	Memo Item	Allocated Activity or Event: Administrative Fundraising	Exempt
	Mailing Address 5119 LIKINI STREET				Voter Drive Direct Candida	_ '
	City	State	Zip Code		Public Comm (ref to party only) to	by PAC
	HONOLULU	HI	96818		Allocated Activity or Event Year-To-I	Date
	Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRY			· · · ·	58758.	.03
	Activity or Event Identifier: Administrative			Category/	M M / D D / Y Y	Y = Y = Y
				Type		016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	16.05			28.53	44	.58
					,	
SI	JBTOTAL of Allocated Federal and NonFeder FEDERAL SHARE	al Activity This +	Page NONFEDERAL	CHADE	= TOTAL AMOUNT	
	FEDERAL SHARE	, T	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	107.22	ـــا ا		190.62		7.84
TO	OTAL This Period (last page for each line only FEDERAL SHARE	/)(Federal sha	re to 21(a)(i) and NONFEDERAL		are to 21(a)(ii)) TOTAL AMOUNT	
		1				

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	22	OF	23	
FOR LI	NE 2	1a OF	FORM	ЗХ

	AME OF COMMITTEE (In Full)				JEOR LINE 21a OF FORM 3.
<u>Н</u> А.	AWAII REPUBLICAN PARTY Full Name (Last, First, Middle Initial) Transact IOTUM GLOBAL HOLDINGS I		.5692	✓ Memo Item	Allocated Activity or Event: X Administrative Fundraising Exempt
	Mailing Address 431 N BRAND ST				X Administrative Fundraising Exempt Voter Drive Direct Candidate Support
	STE 200	State	Zip Code		Public Comm (ref to party only) by PAC
	GLENDALE	CA	91203		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: TAGAVILLA REIMBURSEMENT: ONLINE SU	IBSCRIPTIC	NS		58758.03
	Activity or Event Identifier: Administrative			Category/ Type	Date 07 12 2016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	16.05		7 7	28.53	44.58
<u>—</u> В.	Full Name (Last, First, Middle Initial) Transaction OCEANIC TIME WARNER CABLE	tion ID : H4	.5693	Memo Item	Allocated Activity or Event: Administrative Fundraising Exempt
	Mailing Address PO BOX 30050				Voter Drive Direct Candidate Support
	City HONOLULU	State HI	Zip Code 86920		Public Comm (ref to party only) by PAC
	Purpose of Disbursement: BROADBAND SERVICES	111	80920		Allocated Activity or Event Year-To-Date 58909.85
	Activity or Event Identifier: Administrative			Category/ Type	Date 07 12 2016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	54.66		7 7	97.16	151.82
C.	Full Name (Last, First, Middle Initial) Transact SPRINT	ction ID : H4	.5695	Memo Item	Allocated Activity or Event: Administrative Fundraising Exempt
	Mailing Address PO BOX 219100				Voter Drive Direct Candidate Support
	City KANSAS CITY	State MO	Zip Code 64121		Public Comm (ref to party only) by PAC
	Purpose of Disbursement: MOBILE PHONE EXPENSE				Allocated Activity or Event Year-To-Date 58928.82
	Activity or Event Identifier: Administrative			Category/	M M / D D / Y Y Y Y Y
				Туре	Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	6.83		7	12.14	18.97
SI	JBTOTAL of Allocated Federal and NonFedera	I Activity Th	is Page NONFEDERAL	SHARE	= TOTAL AMOUNT
	61.49			109.30	170.79
T	OTAL This Period (last page for each line only FEDERAL SHARE)(Federal sh	are to 21(a)(i) and		are to 21(a)(ii)) TOTAL AMOUNT
		1			

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	23	C	F	23	
FOR	LINE	21a	OF	FORM	3X

NAME OF COMMITTEE (In Full)

H	AWAII REPUBLICAN PARTY				
Ā.	Full Name (Last, First, Middle Initial) Transact			☐ Memo Item	Allocated Activity or Event:
-	CITY & COUNTY OF HONOLUL		ION OF TREA	ASURY	Administrative Fundraising Exempt
	Mailing Address REAL PROPERTY TAX CO	LLECTION			Voter Drive Direct Candidate Support
-	City	State	Zip Code		Public Comm (ref to party only) by PAC
-	HONOLULU	HI	96812		Allocated Activity or Event Year-To-Date
_	Purpose of Disbursement: PROPERTY TAXES				62781.50
	Activity or Event Identifier: Administrative			Category/ Type	Date 07 28 2016
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	1386.96		7 7	2465.72	3852.68
	Full Name (Last, First, Middle Initial) Transac RED CURVE SOLUTIONS	ction ID : H4	.5694	Memo Item	Allocated Activity or Event: Administrative Fundraising Exempt
	Mailing Address 138 CONANT ST 2ND FLOOR				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
-	BEVERLY	MA	01915		Allocated Activity or Event Year-To-Date
_	Purpose of Disbursement: COMPLIANCE CONSULTING				64305.31
	Activity or Event Identifier: Administrative			Category/	M = M / D = D / Y = Y = Y
				Type	Date 07 29 2016
-	FEDERAL SHARE	+	NONFEDERAL		= TOTAL AMOUNT
-	FEDERAL SHARE 548.57	+	NONFEDERAL		Date
C.		+	NONFEDERAL	SHARE	= TOTAL AMOUNT 1523.81 Allocated Activity or Event:
_	548.57	+	NONFEDERAL	SHARE 975.24	TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt
-	548.57 Full Name (Last, First, Middle Initial)	+ State	NONFEDERAL 7 7 Zip Code	SHARE 975.24	= TOTAL AMOUNT 1523.81 Allocated Activity or Event:
-	Full Name (Last, First, Middle Initial) Mailing Address City		7 1 7	SHARE 975.24	TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support
-	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:		7 1 7	SHARE 975.24	= TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
-	Full Name (Last, First, Middle Initial) Mailing Address City		7 1 7	SHARE 975.24	= TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
-	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:		7 1 7	SHARE 975.24 Memo Item Category/ Type	TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	State	Zip Code	SHARE 975.24 Memo Item Category/ Type	TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	State	Zip Code	SHARE 975.24 Memo Item Category/ Type	TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	State +	Zip Code NONFEDERAL	SHARE 975.24 Memo Item Category/ Type	TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	State +	Zip Code NONFEDERAL	SHARE 975.24 Memo Item Category/ Type SHARE	TOTAL AMOUNT 1523.81 Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE BTOTAL of Allocated Federal and NonFederal	State +	Zip Code NONFEDERAL is Page	SHARE 975.24 Memo Item Category/ Type SHARE	TOTAL AMOUNT 1523.81 Allocated Activity or Event:
su	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE BTOTAL of Allocated Federal and NonFedera FEDERAL SHARE	State + al Activity Th +	Zip Code NONFEDERAL July 1 is Page NONFEDERAL	SHARE 975.24 Memo Item Category/ Type SHARE 3440.96 NonFederal sha	TOTAL AMOUNT Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y